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PTO/SB/50 (06-03)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney Docket No.

22970RE1

First Named Inventor

Schmitt, Raymond F.

Original Patent Number

5,433,064

Original Patent Issue Date
(Month/Day/Year)

07/18/1995

Express Mail Label No.

APPLICATION FOR REISSUE OF:

(Check applicable)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)
(37 C.F.R. 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. ☒ Original U.S. Patent currently
(If Yes, check applicable box(es)) ☒ Yes ☐ No
- ☐ Written Consent of all Assignees (PTO/SB/53)
- ☒ 37 C.F.R. § 3.73(b) Statement
(PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)
or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☒ Statement of status and support for all changes
to the claims. See 37 CFR 1.173 (c).
11. ☐ Original Patent Grant
- ☐ Ribboned Original Patent Grant
- ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS
Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: _____

18. CORRESPONDENCE ADDRESS



Customer Number:

23589

OR ☐ Correspondence address below

Name

Address

Zip Code

City

State

Fax

Country

Telephone

NAME (Print/Type)

Stephen D. Timmons

Registration No. (Attorney/Agent)

26.513

Signature

Date

1/26/04

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number

22970RE1

Claims as Filed - Part 1

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra		Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
(A) 6	Total Claims (37 CFR 1.16(j))	(B) 6	**** 0	=	x \$ 9	= \$0	or	x \$ 18 = \$0
(C) 1	Independent claims (37 CFR 1.16(i))	(D) 1	* 0	=	x \$ 43	= \$0		x \$ 86 = \$0
Basic Fee (37 CFR						\$385		\$770
Total Filing Fee						\$385		\$770

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra-Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 13	MINUS	** 6	= 7	x \$ 9	= \$63	x \$ 18	= \$126
Independent Claims (37 CFR 1.16(i))	*** 3	MINUS	***** 1	= 2	x \$ 43	= \$86	x \$ 86	= \$172
Total Additional Fee						\$149	OR	\$298

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is☒ The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 19-0522.
A duplicate copy of this sheet is enclosed.☒ A check in the amount of \$ 1,068 to cover the filing / additional fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**1/26/04
Date

26,513

Registration Number, if applicable

Signature of Applicant, Attorney or Agent of Record

Stephen D. Timmons

Typed or printed name

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of)	Examiner:
)	Group Art Unit:
SCHMITT, Raymond F., et al.)	
)	
)	
Title: ROTARY CUTTER BED HARVESTER)	
WITH NON-AUGER CONVEYING MEANS FOR))	
OUTBOARD CUTTERS)	


TRANSMITTAL

Transmitted herewith is/are: Express Mail Transmittal; Reissue Patent Application Transmittal; Reissue Application Fee Transmittal Form; \$1,068 Filing Fee; Reissue Application Declaration by the Assignee (2 pages + Supplemental Sheet); Statement under 37 CFR 3.73(b) (1 page + Supplemental Sheet); Reissue Preliminary Amendment (7 pages); Statement of Status and Support for Changes to Claims under 37 C.F.R. § 1.173(c) (8 pages); Copy of U.S. Patent 5,433,064; Information Disclosure Citation (5 sheets + copies of references cited);. This/These document(s) is/are being deposited with the United States Postal Service "Express Mail Post. Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Mail Stop Reissue, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on January 26, 2004.

EL 993326599 US

Respectfully submitted,

HOVEY WILLIAMS LLP

by 

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(Docket No. 22970REI)